

CALIFORNIA CHILD CUSTODY PROJECT

Sponsored by the Statewide Office of Family Court Services
Administrative Office of the Courts, Judicial Council of California

NON-RESPONSE FORM

Please complete for each client who appears for an appointment and does not complete the Mediation Client Profile or the Family Court Services Client Profile.

(8-15) 1. Date of session: ____/____/____

2. Gender:

- (16) ^[1] ☐ Female
^[2] ☐ Male

3. Please check all reasons for non-response:

- (17) ^[1] ☐ Refusal
(18) ^[1] ☐ No time before session
(19) ^[1] ☐ Client not literate in English or Spanish → Literate in any other language?
(20) ^[1] ☐ Tagalog
^[2] ☐ Chinese
^[3] ☐ Vietnamese
^[7] ☐ Other: (Please specify)
(21) ^[1] ☐ Other: (Please specify)
(22) ^[1] ☐ Don't know

4. Is domestic violence an issue for this family?

- (23) ^[1] ☐ Yes
^[0] ☐ No
^[9] ☐ Don't know

5. Description of client: (Your best guess)

a. Estimated income

- (24) ^[1] ☐ Low--under \$500/month
^[2] ☐ Average
^[3] ☐ High--over \$5,000/month
^[9] ☐ Can't estimate

b. Ethnicity (Please check all that apply)

- (25) ^[1] ☐ American Indian, Eskimo, or Aleut
(26) ^[1] ☐ Asian or Pacific Islander
(27) ^[1] ☐ Black
(28) ^[1] ☐ Hispanic
(29) ^[1] ☐ White
(30) ^[1] ☐ Other: (Please specify)
(31) ^[1] ☐ Don't know